2015 Annual Report of the Texas Poison Control Network



Injury Epidemiology & Surveillance Branch, July 2016

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July 2016



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Little house on the bluebonnet prairie © 2013 by Dave Hensley is licensed under CC BY-NC-ND 2.0. Available at https://www.flickr.com/photos/davehensley/8667627401/. (Cover)
North Texas Poison Center (Page 2), West Texas Regional Poison Center (Page 9)



ABOUT THIS REPORT

United States poison centers are telephone consultation services that assist in the management of potentially adverse exposures to various substances. Texas has six poison centers that form the Texas Poison Control Network (TPCN). Together, these six poison centers service the entire state - a population of over 25 million. A team of physicians with specialty certification in toxicology serve as medical directors for TPCN and provide support and consultative services to staff and healthcare providers. Specially trained nurses, pharmacists, and physicians answer calls across the Network.

The TPCN acts as a valuable resource for the state of Texas, answering calls 24 hours a day through the nationwide 1-800-222-1222 hotline. This service is available to assist both the public and healthcare providers. The TPCN professionals are able to directly answer all calls in English and Spanish and

can access interpreters for assistance in 160 other languages and for the hearing impaired.

This report describes the characteristics of the human exposures reported to the TPCN in 2015. Although the TPCN also received calls about exposures among animals and general information calls, these were not included in this report. This report focuses on the demographic characteristics of the individuals involved in these exposures, the circumstances or scenarios under which these exposures occurred, and the management and outcome of these exposures.

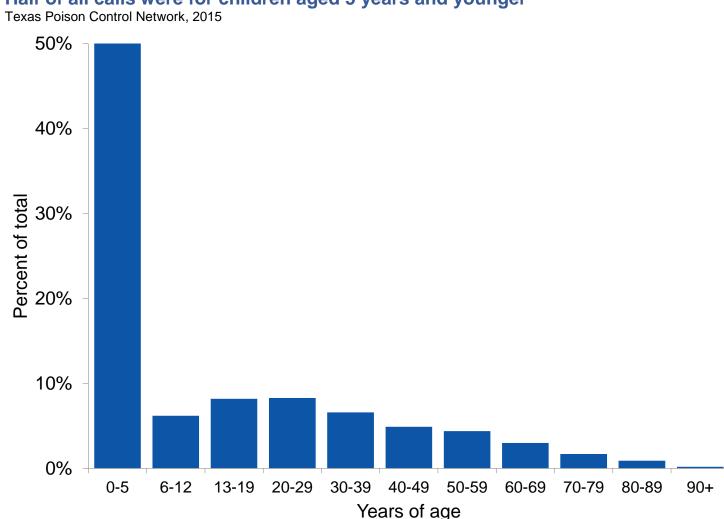
DEMOGRAPHICS

In 2015, the TPCN handled 169,727 calls about people (patients) exposed to a variety of substances, about 465 per day.

There was not a large difference in calls based on sex. Slightly more than half (51.5%) of the patients were females (Table 1, Page 11).

Call volume differed by age group. Half (50.1%) of all the patients were children aged five years or less. Children of five years and younger are more likely to have poisoning exposures. Adults 20 years or older accounted for 34.7% of the patients (Table 2, Page 12; Figure Right).

Half of all calls were for children aged 5 years and younger



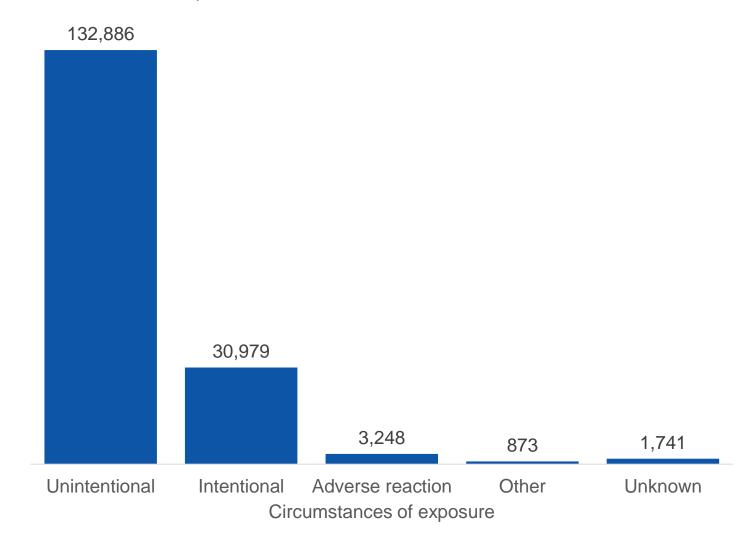
CIRCUMSTANCES AND SCENARIO OF EXPOSURE

Most exposures occurred at the person's own residence (91.6%), with no other location accounting for more than 1.7% of the exposures. While the majority (68.3%) of the calls reporting the exposure also originated from the person's own residence, 22.8% of the calls came from a healthcare facility (Table 3, Page 13). In other words, many of the calls from healthcare facilities were reporting exposures that had occurred at home.

Exposures occurred under a variety of circumstances (reasons). The majority (78.3%) were unintentional (accidental). Intentional exposures accounted for 18.3% of exposures, with 12.6% being suspected attempted suicides. Only 1.9% of exposures involved adverse reactions and 0.5% involved other circumstances such as malicious intent or tampering with the substance (Table 4, Page 14; Figure Right).

Most patient exposures were unintentional

Texas Poison Control Network, 2015



ROUTE OF POISONING

An exposure can occur by an array of different routes and may involve more than one route at a time. The most common route of exposure was ingestion, reported in 85.8% of the exposures. The next most common routes were dermal contact (5.9%), inhalation (4.6%), ocular exposure (3.9%), and a bite or sting (2.7%) (Table 5, Page 15).

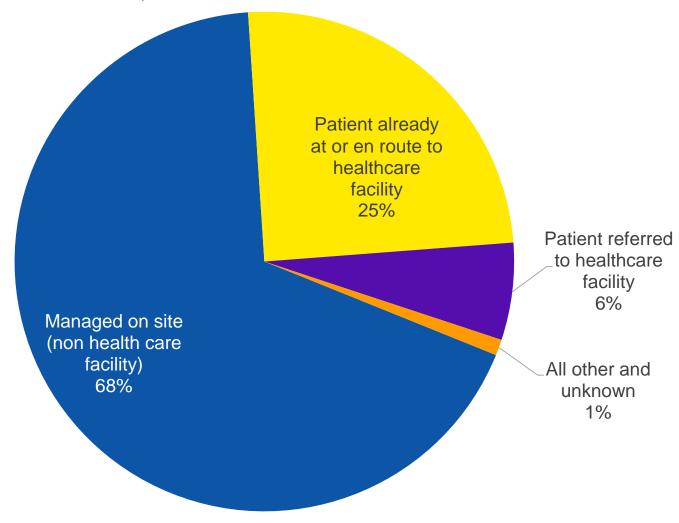
The exposures can involve any number of different substances or products. However, the majority of exposures involved a single substance or product (89.2%) (Table 6, Page 16).

MANAGEMENT OF THE EXPOSURES

In most instances, potentially poisoned patients are successfully managed on site (e.g., at home) and do not require a medical evaluation in a healthcare facility. This results in considerable cost-savings because management at a healthcare facility may result in costs when the exposure could have been safely managed at home. Almost one-quarter of the patients were already at or en route to a healthcare facility when the poison center was contacted; thus, the poison center could not influence where those patients were managed. Overall, 67.8% of the patients were managed on site; the poison center was able to provide information and recommendations to keep the patient at home and avoid an unnecessary healthcare visit. It is also important to note that 6.3% of the TPCN's patients were referred to a healthcare facility by the poison center in cases where a medical evaluation and treatment were necessary for the patients' safety due to the potential severity and risks of the exposure (Table 7, Page 17; Figure Right).

Most patients were managed on site

Texas Poison Control Network, 2015

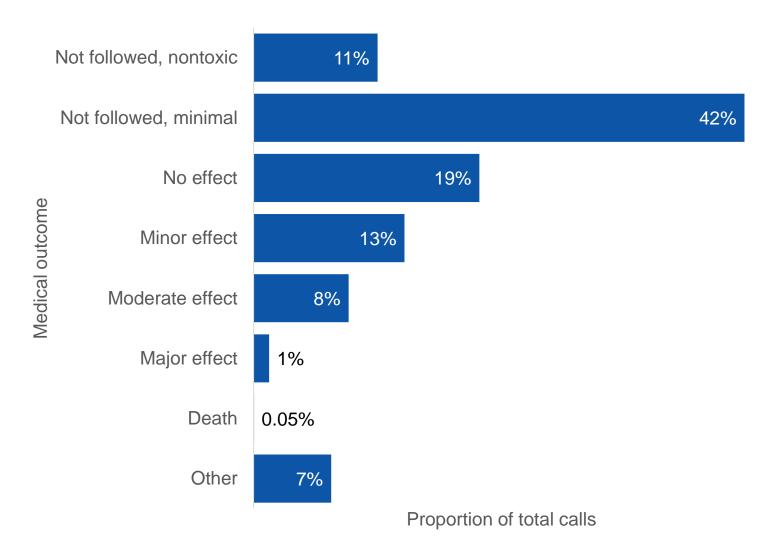


OUTCOME OF EXPOSURES

The outcome severity of the exposure can vary from no adverse effects to death. In 2015, 41.3% of the patients were followed to a final medical outcome. While 32,470 exposures resulted in no adverse effects to the patient, 78 were known to have resulted in death. Approximately 57% of the exposures were not followed to a final medical outcome because the nature of the exposure and substance(s) involved were either non-toxic or not expected to cause more than minimal adverse effects (Table 8, Page 18; Figure Right). The small remainder that were not followed to a final medical outcome by the poison centers were due to the inability to obtain subsequent information on the patient for a variety of reasons such as the poison centers inability to successfully reach the caller or patient, the caller's or patient's inability or refusal to provide information, or their desire to remain anonymous.

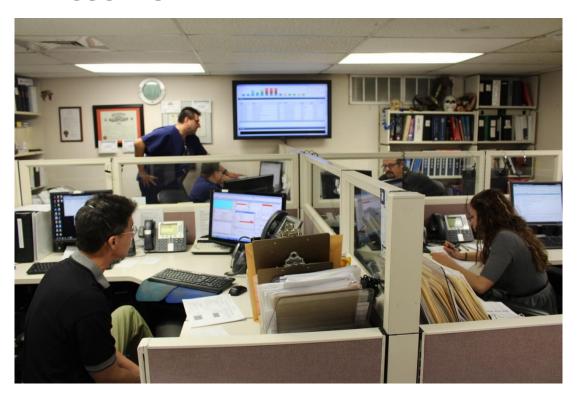
Most medical outcomes were either unknown or minor in severity

Texas Poison Control Network, 2015



MOST COMMON SUBSTANCES INVOLVED IN THE EXPOSURES

Exposures may involve a variety of substances such as medications, illicit/illegal drugs (e.g., cocaine, heroin, and marijuana), food poisonings, plants and animals, household products, and industrial chemicals. The data system of the TPCN groups these substances into 66 major categories. The most common substance category was analgesic medications, which were involved in 12.4% (or one in eight) of all exposures. The classification for analgesic medications includes a wide range of products from over-the-counter pain relievers such as acetaminophen and aspirin to prescription narcotic opioids such as morphine and hydrocodone. The next most common categories were household cleaning substances (8.9%), cosmetics and personal care products (8.4%), sedatives and antipsychotic medications (6.3%), and antihistamine medications (5.8%) (Table 9, Page 19).

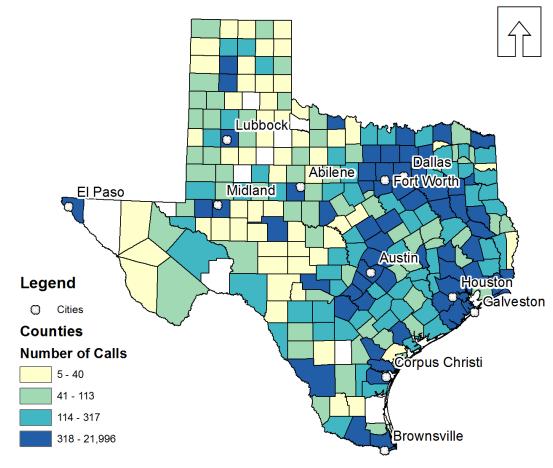


GEOGRAPHIC LOCATION OF THE EXPOSURES

The TPCN received calls from nearly all of the 254 Texas counties in 2015 (Table 10, Pages 20-22). It must be noted that these were the counties where the call came from and not necessarily where the exposure occurred or was treated. For instance, the patient may have been exposed in one county and then gone to a healthcare facility in another county from which the call was generated.

Patient exposures by county of caller

Texas Poison Control Network, 2015



Source: Texas Poison Control Network

Number of Calls are divided by quartiles, Counts below 5 are supressed.

EXPOSURES BY GENDER

Table 1. Patient exposures by	y gender*, Texas Poison Contro	ol Network, 2015
Patient gender	Number	% of total
Male	81,986	48.3
Female	87,132	51.3
Unknown	609	0.4
Total	169,727	

^{*}Human exposures only

EXPOSURES BY AGE

Table 2. Patient exposures by age*, Texas Poison Control Network, 2015				
Patient age (years)	Number	% of total		
0-5	85,082	50.1		
6-12	10,450	6.2		
13-19	13,834	8.2		
20-29	14,026	8.3		
30-39	11,221	6.6		
40-49	8,318	4.9		
50-59	7,423	4.4		
60-69	5,011	3.0		
70-79	2,866	1.7		
80-89	1,549	0.9		
90+	306	0.2		
Unknown	9,641	5.7		
Total	169,727			

^{*}Human exposures only

EXPOSURES BY SITE AND CALLER SITE

Table 3. Patient exposures by exposure site* and caller site*, Texas Poison Control Network, 2015

Site	Exposu	re site	Caller site		
	Number	% of Total	Number	% of total	
Own residence	155,488	91.6	115,924	68.3	
Health care facility	406	0.2	38,676	22.8	
All other and unknown	13,833	8.2	15,127	8.9	
Total	169,727		169,727		

^{*}Human exposures only

EXPOSURES BY EXPOSURE REASON

Table 4. Patient exposures by exposure reason*, Texas Poison Control Network, 2015

Network, 2015			
Exposure reason	Number	% of total	% of main subgroup
Unintentional	132,886	78.3	100.0
General	87,038	51.3	65.5
Therapeutic error	21,660	12.8	16.3
Misuse	13,997	8.2	10.5
All other and unknown	10,191	6.0	7.7
Intentional	30,979	18.3	100.0
Suspected attempted suicide	21,316	12.6	68.8
All other and unknown	9,663	5.7	31.2
Adverse reaction	3,248	1.9	100.0
Drug	2,474	1.5	76.2
Food	283	0.2	8.7
Other	491	0.3	15.1
Other	873	0.5	100.0
Contamination/tampering	412	0.2	47.2
Malicious	418	0.2	47.9
Withdrawal	43	0.0	4.9
Unknown	1,741	1.0	100.0
Total	169,727		

^{*}Human exposures only

EXPOSURES BY ROUTE

Table 5. Patient exposures by route*, Texas Poison Control Network, 2015				
Exposure route	Number	% of total		
Ingestion	145,678	85.8		
Dermal	10,079	5.9		
All other and unknown	21,273	12.5		
Total	169,727			

An exposure may occur by more than one route *Human exposures only

EXPOSURES BY NUMBER OF SUBSTANCES

Table 6. Patient exposures by number of substances*, Texas Poison Control Network, 2015				
Number of substances	Number	% of total		
1	151,386	89.2		
2	11615	6.8		
3 or more	6,726	4.0		
Total	169,727			

^{*}Human exposures only

EXPOSURES BY MANAGEMENT SITE

Table 7. Patient exposures by management site*, Texas Poison Control Network, 2015				
Management site	Number	% of total		
Managed on site (non health care facility)	115,152	67.8		
Patient already at or en route to healthcare facility	42,144	24.8		
Patient referred to healthcare facility	10,680	6.3		
All other and unknown	1,751	1.0		
Total	169,727			

^{*}Human exposures only

EXPOSURES BY MEDICAL OUTCOME

Table 8. Patient exposures by medical outcome*, Texas Poison Control Network, 2015 Medical outcome % of total Number 19.1 No effect 32,470 Minor effect 21,702 12.8 Moderate effect 8.0 13,659 Major effect 2,240 1.3 Death 78 0.0 Not followed, judged as nontoxic 17,824 10.5 exposure (clinical effects not expected) Not followed, minimal clinical effects 41.6 70,589 possible (no more than minor effect possible) Other 11,165 6.6 169,727 **Total**

^{*}Human exposures only

EXPOSURES BY CATEGORY

Table 9. Patient exposures by 10 most common non-pharmaceutical and pharmaceutical categories*, Texas Poison Control Network, 2015 Non-pharmaceuticals **Pharmaceuticals** % of Category % of Category total total Cleaning substances 15,068 8.9 Analgesics 21,095 12.4 (household) Cosmetics, personal 14,187 8.4 Sedatives, hypnotics, 10,664 6.3 care products antipsychotics Pesticides 6,922 **Antihistamines** 9,847 5.8 4.7 Foreign bodies, toys, 6,655 Antidepressants 7.987 miscellaneous 5,101 Cardiovascular drugs 4.0 Alcohols 6,746 4,887 Topical preparations Bites and 5,772 3.4 envenomations 3.2 Chemicals 3,171 Cold and cough 5,350 preparations **Plants** 2,810 1.7 Vitamins 5,319 3.1 Hydrocarbons 2,406 1.4 Stimulants and street 5,276 3.1 drugs Arts, crafts, office Antimicrobials 2.7 1,863 4,656 supplies

An exposure may involve more than one substance. Total is for total exposures, both non-pharmaceuticals and pharmaceuticals. *Human exposures only

169,727

Total

Total

169,727

TABLE 10. EXPOSURES BY CALLER COUNTY, TEXAS POISON CENTER NETWORK, 2015

Caller county	Number	Callahan	108	Deaf Smith	101	Gray	187
Anderson	381	Cameron	1,985	Delta	27	Grayson	897
Andrews	195	Camp	92	Denton	3,831	Gregg	1,058
Angelina	605	Carson	28	Dickens	28	Grimes	134
Aransas	111	Cass	186	Dimmit	97	Guadalupe	798
Archer	21	Castro	42	Donley	19	Hale	222
Armstrong	20	Chambers	93	Duval	55	Hall	17
Atascosa	264	Cherokee	363	Eastland	149	Hamilton	40
Austin	163	Childress	59	Ector	1,021	Hansford	29
Bailey	42	Clay	28	Edwards	8	Hardeman	25
Bandera	104	Cochran	12	El Paso	5,274	Hardin	181
Bastrop	458	Coke	20	Ellis	960	Harris	21,996
Baylor	45	Coleman	52	Erath	255	Harrison	269
Bee	345	Collin	4,319	Falls	91	Hartley	40
Bell	2,987	Collingsworth	16	Fannin	175	Haskell	76
Bexar	11,871	Colorado	113	Fayette	181	Hays	1,176
Blanco	101	Comal	1,050	Fisher	27	Hemphill	31
Borden	•••	Comanche	109	Floyd	44	Henderson	633
Bosque	95	Concho	17	Foard		Hidalgo	3,768
Bowie	598	Cooke	268	Fort Bend	2,082	Hill	226
Brazoria	1,808	Coryell	593	Franklin	41	Hockley	123
Brazos	1,200	Cottle	5	Freestone	136	Hood	443
Brewster	63	Crane	38	Frio	117	Hopkins	250
Briscoe		Crockett	41	Gaines	87	Houston	128
Brooks	29	Crosby	41	Galveston	1,856	Howard	269
Brown	374	Culberson	7	Garza	38	Hudspeth	
Burleson	92	Dallam	50	Gillespie	174	Hunt	506
Burnet	286	Dallas	12,765	Glasscock	10	Hutchinson	203
Caldwell	201	Dawson	74	Goliad	51	Irion	5
Calhoun	132	De Witt	117	Gonzales	175	Jack	47

Jackson	99	Lubbock	1,934	Parker	748	Sterling	9
Jasper	157	Lynn	30	Parmer	45	Stonewall	10
Jeff Davis	5	Madison	93	Pecos	123	Sutton	28
Jefferson	1,398	Marion	37	Polk	342	Swisher	39
Jim Hogg	34	Martin	53	Potter	1,181	Tarrant	10,542
Jim Wells	313	Mason	20	Presidio	22	Taylor	1,099
Johnson	1,219	Matagorda	255	Rains	75	Terrell	
Jones	105	Maverick	197	Randall	956	Terry	60
Karnes	108	McCulloch	67	Reagan	20	Throckmorton	9
Kaufman	668	McLennan	1,640	Real	13	Titus	178
Kendall	235	McMullen		Red River	55	Tom Green	767
Kenedy		Medina	255	Reeves	65	Travis	6,419
Kent		Menard	10	Refugio	40	Trinity	101
Kerr	410	Midland	1,384	Roberts	5	Tyler	168
Kimble	36	Milam	138	Robertson	65	Upshur	204
King		Mills	19	Rockwall	633	Upton	40
Kinney	11_	Mitchell	44	Runnels	75	Uvalde	203
Kleberg	232	Montague	151	Rusk	317	Val Verde	227
Knox	25	Montgomery	2,828	Sabine	78	Van Zandt	285
La Salle	30	Moore	118	San Augustine	46	Victoria	741
Lamar	390	Morris	56	San Jacinto	72	Walker	382
Lamb	108	Motley	9	San Patricio	527	Waller	122
Lampasas	114	Nacogdoches	444	San Saba	25	Ward	116
Lavaca	150	Navarro	377	Schleicher	15	Washington	215
Lee	83	Newton	25	Scurry	141	Webb	1,067
Leon	89	Nolan	133	Shackelford	26	Wharton	291
Liberty	568	Nueces	2,786	Shelby	144	Wheeler	49
Limestone	152	Ochiltree	80	Sherman	13	Wichita	1,076
Lipscomb	17	Oldham	33	Smith	1,573	Wilbarger	110
Live Oak	60	Orange	378	Somervell	66		
Llano	142	Palo Pinto	249	Starr	256		
Loving		Panola	127	Stephens	94		

Willacy	92
Williamson	2,839
Wilson	294
Winkler	48
Wise	410
Wood	266
Yoakum	45
Young	139
Zapata	49
Zavala	67
Total	169,727

^{*}Human exposures only, "..." suppressed due to low numbers.

TECHNICAL NOTES

When a person calls a poison center in the Texas Poison Control Network, the poison specialist collects a variety of information as an electronic record in a single, centralized database used by all of the poison centers. The variables and codes for each variable were standardized by the American Association of Poison Control Centers (AAPCC, www.aapcc.org). Quality control measures are utilized to ensure the accuracy and completeness of the data collected. A copy of the Texas Poison Control Network database is provided to the Texas Department of State Health Services, where further quality control measures are performed. Once the data have completed quality control measures, analyses for the annual report are performed using Microsoft Access version 10.

Variables:

Caller county: County where the caller was located at the time of the initial call. Analysis was based on the county name.

Caller site: The site of the caller at the time of the initial call.

Exposure reason: The underlying reason, purpose, or intent by which the exposure occurred.

Exposure route: The route of the exposure. An exposure may involve more than one route.

Exposure site: The location of the patient at the time the exposure occurred.

Management site: Where the patient was managed. This includes on site (outside of a healthcare facility), already at or en route to a

healthcare facility, or referred to a healthcare facility by the poison center.

Medical outcome: Medical outcome or severity of the exposure based upon all available information.

Number of substances: The number of different substances involved in the exposure. There is no limit to the number of substances.

Patient age: The patient's actual age whenever it can be obtained. If the patient's actual age cannot be obtained, an age category is assigned.

Patient gender: The gender of the patient.

Substance categories: The substance or product involved in an exposure. These substances are grouped into major categories by the American Association of Poison Control Centers (AAPCC, www.aapcc.org). All of the substance categories can be found in any of the AAPCC annual reports available on their website.

Variable subgroups: The subgroups for each variable were standardized by the American Association of Poison Control Centers (AAPCC, www.aapcc.org).

Numbers: Numbers are the number of human exposures (patients).

Limitations: Reporting of exposures to the Texas Poison Control Network is not mandatory. Thus, reported exposures are not representative of all such exposures that occur in Texas. The information is primarily provided by the caller and not independently verified by clinical or toxicologic laboratory tests.